

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lawrence Martin

Name

(2) PO Box 120336

Address (number and street)

Fort Lauderdale, FL 33312

City, State, Zip Code

☐ Check here if address has changed

OFFICE USE ONLY

RECEIVED

SEP 09 2019

CITY CLERK'S OFFICE

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Lauderhill City Commissioner, Seat 1

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 08 / 01 / 2019 To 08 / 31 / 2019 Report Type: Monthly

☒ Original

☐ Amendment

☐ Special Election Report

2019 M8

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 250 . 00

Loans \$ _____ , _____ , 100 . 00

Total Monetary \$ _____ , _____ , 350 . 00

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 30 . 28

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 30 . 28

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 350 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 30 . 28

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Barbara Gayle

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Barbara Gayle
Signature

(Type name) Lawrence Martin

☒ Candidate ☐ Chairperson (only for PC and PTY)

X Lawrence Martin
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Lawrence Martin (2) I.D. Number _____

(3) Cover Period 08 / 01 / 2019 through 08 / 31 / 2019 (4) Page 2 of 3

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Contributor Type Occupation | | (9) Contribution Type | (10) In-kind Description | (11) Amendment | (12) Amount |
|----------------|--|---------------------------------------|---------|-----------------------------|--------------------------------|-------------------|----------------|
| 08 / 16 / 2019 | Lawrence Martin PO Box 120336 Ft. Lauderdale, FL 33312 | Individ | Retired | Cash, loan | | | \$100.00 |
| 1 | | | | | | | |
| 08 / 27 / 2019 | Juanita Williams 3600 NW 7th Ct Lauderhill, FL 33311 | Individ | Retired | Cash | | | \$150.00 |
| 2 | | | | | | | |
| 08 / 29 / 2019 | Angela Pittman-Dixon & John Dixon 3741 NW 7th Ct Ft. Lauderdale, FL 33311 | Individ | Retired | Check | | | \$100.00 |
| 3 | | | | | | | |
| / / | | | | | | | |
| | | | | | | | |
| / / | | | | | | | |
| | | | | | | | |
| / / | | | | | | | |
| | | | | | | | |
| / / | | | | | | | |
| | | | | | | | |

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Lawrence Martin

(2) I.D. Number _____

(3) Cover Period 08 / 01 / 2019 through 08 / 31 / 2019

(4) Page 3 of 3

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Purpose (add office sought if contribution to a candidate) | (9) Expenditure Type | (10) Amendment | (11) Amount |
|----------------|--|--|----------------------------|-------------------|----------------|
| 08 / 29 / 2019 | Bank of America 1601 E. Oakland Park Blvd Oakland Park, FL 33334 | | | | |
| 1 | | Check order fee | Bank charge | | \$30.28 |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |
| / / | | | | | |
| | | | | | |